

POSITION	ID NO.	DATE
CLASSIFIER	49	7/30/87
EXAMINER	3861	10/21/87
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	1/22/87
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Canceled
- ↑ Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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